



1635 \$

PATENT APPLICATION
Previous Docket No. 0054.1088.015
Attorney Docket No. 330252-00002
Date: May 15, 2003

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

RECEIVED
#24 MAY 28 2003
TECH CENTER 1600/2900

Applicant(s): Barbara A. Gilchrest *et al.*
Application No.: 09/540,843
Filed: March 31, 2000
For: USE OF LOCALLY APPLIED DNA FRAGMENTS
Group Art Unit: 1635
Examiner: B. Whiteman

CERTIFICATE OF MAILING

I hereby certify that this paper is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this date.

05/16/2003
Date

Registration No. 36,107
Attorney for Applicant(s)

AMENDMENT TRANSMITTAL

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MAY 22 2003

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Assistant Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment and Response to the Office Action of February 27, 2003 in the above-identified application.

1. () A paper requesting correction/substitution of drawings is attached.
2. (X) Petition for Extension of Time within the third month with fee of \$465.

2. Fee for Claims

(X) No additional fee is required.

The fee for additional claims in accordance with 37 C.F.R. §1.16(b)-(d) has been calculated as shown below:

					SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	Claims Remaining After Amendment	Highest No. Previously Paid for		Present Extra	Rate	Additional Fee	Rate	Additional Fee
Total	64	Minus	92	-	x 9	-	x 18	-
Indep.	29	Minus	26	3	X 42	141.00	x 84	-
Fee for Multiple Dependent Claims					+140	-	+280	-
TOTAL ADDITIONAL FEES						141.00	OR	-

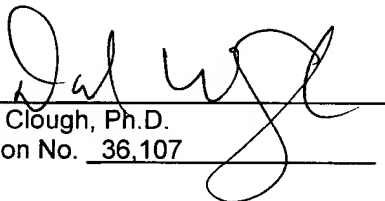
3. **Method of Payment of Fees**

- (X) Enclosed is our firm check in the amount of: \$ 141.00.
() Charge \$ _____ to Deposit Account No. 50-1214.

4. (X) The Commissioner is hereby authorized to charge any additional fees which may be required in this application under 37 C.F.R. §§1.16-1.17 during its entire pendency, or credit any overpayment, to Deposit Account No. 50-1214. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-1214. This sheet is filed in duplicate.

Respectfully Submitted,

May 16, 2003
(Date)

By: 
David W. Clough, Ph.D.
Registration No. 36,107

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